



North Carolina Department of Health and Human Services
Division of Mental Health, Developmental Disabilities and Substance Abuse Services
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Michael F. Easley, Governor
Carmen Hooker Odom, Secretary

Michael Moseley, Director

August 31, 2004

MEMORANDUM

TO: Area Program Directors

FROM: Michael Moseley

SUBJECT: Comprehensive Treatment Services Program (CTSP) Funding

As directed by HB 1414, the Division is identifying and eliminating administrative and fiscal barriers that presently exist in the delivery of services provided with CTSP funding. A Division sponsored work group, which included area program and Council representation, has formulated several changes that will expand the use of CTSP funds to additional child populations and services. Specific details will be forthcoming, however, the essence of these changes will be to serve more children who may be at risk for out of home placement, including children with substance abuse disorders.

As a part of the Division support of System of Care as the best practice for children, we are implementing a policy to increase the flexibility in the use of UCR and/or Non-UCR funding.

Activities supported by UCR and/or Non-UCR funding may include:

- Wraparound & family supports– child specific
- Family/youth participation and strengthening family/youth support, family/youth advocacy groups involvement within the community, self-directed supports.
- Community and family/youth training on comprehensive assessment, Person Centered Plan (PCP)/ Child and Family Team (CFT) process and evidenced based practices that will eliminate barriers to accessing appropriate services & supports children and their families need.
- Consumer & Family Advisory Committee (CFAC) and workforce training and education regarding the Child Mental Health Plan and key elements such as system of care, cultural responsiveness.
- Crisis care to prevent institutionalization
- Programs that will increase community capacity
- Prevention and early intervention activities – fund services & supports to promote capacity for prevention and intervene early with children at risk of SED (e.g. work with youth such as Reconnecting Youth, Strengthening Families, consultation with schools, peer group brief interventions, mentoring, self-esteem building, self-directed supports, consultation with pediatric and primary care practices, public health, school health, parent education and support and other community based services & supports).
- Community Collaborative Training



Comprehensive Treatment Services Program (CTSP) Funding

In no circumstances should these funds be used to support services that are defined in regulation, policy or through agreement by any other Department or Agency such as schools, Vocational Rehabilitation (VR), and medical services. Services should be limited to a child and their direct care givers.

Activities for which CTSP funding will not be approved include:

- Hiring of LME staff
- School services that should be the purview of schools
- DJJ Residential Setting
- Funds are not to be used if other means of funding are available to support services i.e. Medicaid, private insurance, Healthchoice

In order to provide more flexibility in the allocation of funds, area programs should submit requests to Wanda Mitchell, Budget & Finance Office, to realign existing CTSP funds in conjunction with services outlined in the Child Mental Health Plan (CMHP).

As soon as complete details have been formulated by the Division, a general distribution of information and implementation guidelines will be distributed to all area/county programs.

MM/wm/fs

cc: Secretary Carmen Hooker Odom
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